

The CPD programme for *SAMJ* is administered by Medical Practice Consulting.
CPD questionnaires must be completed online at www.mpconsulting.co.za.

Please note: The change in CPD question format comes from the accreditation bodies, who have informed us that CPD questionnaires must consist of a minimum of 5 questions, 80% of which should be MCQs with a minimum of 4 options and only 20% of which may now be in the form of 'True or false' answers.

MCQs may be of 'single correct answer' or 'multiple correct answer' format. Where the question states that more than one answer is correct, mark more than one of a, b, c or d (anything from two to all answers may be correct). For example, in Question 1, if you think that a, b and c are correct (note that these are not necessarily the correct answers), mark each of these on the answer form. Where the question states that only one answer is correct (there are none of these this month), mark the single answer that you think is correct.

1. Practice update to optimise the performance and interpretation of blood cultures: 2022 update

Regarding blood cultures (more than one answer is correct):

- Bacteraemia is the presence of viable bacteria in the bloodstream.
- Anaerobic blood cultures are best suited for the isolation of anaerobes, and cannot support the growth of some aerobic micro-organisms and fungi.
- Isolation of anaerobes from blood culture rarely leads to a change in antibiotic choice, as many empirical antibiotic regimens include anaerobic cover, particularly in clinical settings where anaerobes are likely.
- There is little consensus on the number of blood cultures needed for the investigation of patients with suspected infective endocarditis.

2. Prophylaxis is the new standard of care in patients with haemophilia

Regarding prophylaxis in haemophilia patients (more than one answer is correct):

- Mutation prevalence in haemophilias is the same globally, irrespective of race, ethnicity, geographical location or socioeconomic status.
- The current globally accepted standard of care in haemophilia A and all other inherited bleeding disorders is the intravenous replacement of the missing clotting factor.
- Prophylaxis is not the recommended standard of care in resource-constrained settings.
- The therapeutic goal of prophylaxis is to prevent spontaneous bleeding with consequent preservation of joint health.

3. Is open-identity gamete donation lawful in South Africa (SA)?

Regarding the legality of open-identity gamete donation in SA (more than one answer is correct):

- Open-identity gamete donation is not offered in SA.
- Being 'open identity' typically means that the donors have agreed to have their identities released on request by the donor-conceived child once the child reaches the age of majority.

- The South African Law Reform Commission recently stated that 'The legal position in South Africa is that gamete donors ... must be anonymous and it is an offence to reveal the identity of a gamete donor ...'.

- Papers by the South African Law Reform Commission carry full legal authority in SA law.

4. Solid malignancies during the first year of life: A 20-year review at Red Cross War Memorial Children's Hospital

Regarding solid malignancies during the first year of life (more than one answer is correct):

- Paediatric tumours are rare, representing ~1% of all new tumour cases each year.
- Their origin, behaviour and treatment are similar to adult tumours.
- Among paediatric tumours, two groups stand out: neonatal tumours (during the first 28 days of life) and infantile tumours (during the first year of life), which respectively represent 2% and 10% of paediatric tumours.
- Unlike adult tumours, which are usually recorded by primary site, childhood tumours are more meaningfully grouped by histological type and primary site based on the International Classification of Childhood Cancer (ICCC).

5. Safety and efficacy of inclisiran in SA patients at high cardiovascular risk: A subanalysis of the ORION phase III clinical trials

Answer true or false:

Inclisiran, a small-interfering RNA (siRNA) that inhibits the production of PCSK9 in the liver, was shown to significantly reduce low-density lipoprotein cholesterol (LDL-C) compared with placebo, and at the same time significantly reduced LDL-C compared with placebo.

Readers please note: Articles may appear in summary/abstract form in the print edition of the Journal, with the full article available online at www.samj.org.za

A maximum of 3 CEUs will be awarded per correctly completed test.

INSTRUCTIONS

- Read the journal. All the answers will be found there, in print or online.
- Go to www.mpconsulting.co.za to answer the questions.

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